Nebraska Department of Insurance –
External Review Solution (DOI ER)
User Guide – Treating Healthcare Provider
Perspective

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About this Document

The purpose of this document is to introduce the Portal Solution for the Department of Insurance External Review (DOI ER) process. This guide was created for use by treating healthcare providers and provider representatives for their use in filing external review requests and completing

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NE Enterprise Registration

In order to access the DOI External Review Portal, the user will first need to register with the Nebraska Enterprise System to obtain the credentials that will be used to access the portal.

- The DOI External Review Portal can be located at https://ecmp.nebraska.gov/DOI-ER
- Select Register Here under the New User Instructions section

After the security questions are set up and Register Account is selection, the user will be automatically directed to another page within the Nebraska Enterprise System. This page is not necessary for registration, and the user may return to the portal home page at https://ecmp.nebraska.gov/DOI-ER
Solution Overview

The solution comprises two primary components: DOI External Review Portal and OnBase Workflow. The two components are linked via OnBase Document Types. All data and documents input/retrieved via the portal are directly stored and accessed in/from OnBase.

- The DOI External Review Portal can be located at https://ecmp.nebraska.gov/DOI-ER
- OnBase Unity Client is available via the Software Center or by contacting OCIO

DOI External Review Portal Access

After a user is registered within the Nebraska Enterprise system, and they have entered those credentials to access the portal, they will be prompted to define the user role they will function as (Patient – Policyholder – Patient Representative; Physician; Insurance Company – Producer; IRO).

- **Patient - Policyholder - Patient Representative**
  
  Patient/Authorized Representative user access to create an external request is granted immediately. Throughout the request and review process, the Patient/Authorized Representative is able to view status and provide additional supporting documentation to support the external review complaint.

- **Physician**
  
  Physician user access is granted once Nebraska Department of Insurance staff has reviewed and approved your information. Once access has been granted, you will be able to create a new complaint requesting external review on behalf of a patient. For complaints where you've been granted access to, you will also be able to view status and provide additional supporting documentation to the complaint.

- **Insurance Company - Producer**
  
  Insurance Company/Producer user access is granted once Nebraska Department of Insurance staff has reviewed your information. Once access has been granted, you will be able to review and provide additional supporting documentation to assigned complaint and related supporting documentation. Once access has been granted to a complaint, you will also be able to add additional insurer users specific to your assigned complaints.

- **IRO**
  
  Independent Review Organization user access is granted once Nebraska Department of Insurance staff has reviewed your information. Once access has been granted, you will be able to review and provide additional supporting documentation to assigned complaint.

Please select a user type listed above

If the user is a patient – policyholder - representative they will have immediate access to the solution to submit External Review Requests. If a user is a healthcare provider, insurance company user, or IRO company user; a notification will be sent to DOI ER Reviewer internal staff to approve or deny access (for insurers and IROs, each company may have an administrator account that can grant access and manage account for members who register as “Staff”). When a new healthcare provider, insurance company user, or IRO company user requests access to the solution, they will be required to choose or enter their contact information. After access is granted or denied, a notification will be sent to the user and they will be able to access the solution.
Data Lookups

All contact information for healthcare providers, healthcare facilities, insurance companies, and IRO companies are required to be reviewed and approved by Department of Insurance Staff. To do this, any time a new user requests access to the solution, they are required to choose from a list of already approved contact information or they can chose “Not listed” in order to enter new information. If they chose “Not listed,” a lookup form is generated with the contact information they entered, and sent to department of insurance staff for review.

Additionally, when a patient – policy holder – representative is filling out their external review case form, they are required to enter their healthcare provider, treating healthcare facility, and insurance company and they are permitted to choose from a list of already approved contact information or they can chose “Not Listed.” If they chose “Not listed,” a lookup form is generated with the contact information they entered, and sent to department of insurance staff for review.

External Review Request Form (Applicant)

To submit a new external review request, a patient/policyholder/representative or physician will log into the DOI ER portal and select “Create New External Review.” From the home screen, a user will also be able to see and resume filling out previously saved External Review Case Requests Forms that have not been submitted as well as check the status of previously submitted External Review Case Requests.

EXTERNAL REVIEW REQUEST

Select “Create New External Review Request” below to begin the external review request process.

Create New External Review Request

The user will fill out their information as prompted through the portal with red ‘*’ fields being required before they can move to the next page. At any point, a user will be able to save their progress and come back later by selecting “Save” and navigating back to the DOI ER Portal login screen.
Portal Home Page (Treating Healthcare Provider)

Once the user has been granted access, the first screen they will see upon logging into the solution in the home page, which consists of two sections to organize all cases assigned to that insurer.

- **Listing of cases requesting expedited consideration or experimental/investigational** will contain cases that have been submitted by an applicant and require a physician certification for an expedited request or an experimental/investigational denial.
- **Assigned External Review Cases** contains all cases that have been assigned to the Treating Healthcare provider for review, as well as cases that are linked to the provider but did not require an expedited or experimental/investigational certification. The cases are available to query from a list of options (User last name, tracking ID # etc...)

In the middle section, the provider also has the option to submit an application on behalf of a patient by clicking **Create New External Review Request**. They can also see a list of cases that have been submitted and those that have been started but not yet submitted. For instructions on submitting an external review request, please refer to the applicant guide.
Email Alerts

As an applicant completes the request, they have two options to obtain the necessary certification from providers. This certification is needed for claims that have been denied as being Experimental-Investigational or if expedited consideration has been requested.

The first option is the E-mail method of obtaining certification, in which the treating healthcare provider they link to the case will receive an email alert informing them of the status of the case. The alert informs the treating healthcare provider of the Tracking # of the case, and that they are needed to provide certification for one or both of these.

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Hello DOCTORFIRSTNAME DOCTORLASTNAME,

An applicant has listed you as the treating healthcare provider with case #2020000017. With this case, the applicant has requested for you to certify that you do or do not agree with the following case requests:

- **Expedited Certification**: Yes
- **Experimental/Investigational Certification**: Yes

Select the below link to access the Nebraska Department of insurance External Review portal to view this case. If this is the first time you've accessed this solution, you will be able to request access via the same link.

https://ecmp.nebraska.gov/DOI-ER

The Nebraska Department of insurance

PO Box 82089

Lincoln, Nebraska 68501-2089

Phone: 402-471-2201

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The other option the applicant has is to upload the supporting documents themselves and attach to their initial request. They must obtain the provider certification on their own and can download the appropriate form from the portal.

Back to Home Page

When the provider clicks the link in the email, they are taken back to the home page to select the case.

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**HEALTHCARE PROVIDER**

<table>
<thead>
<tr>
<th>Tracking #</th>
<th>Expedited</th>
<th>Experimental</th>
<th>Policyholder</th>
<th>Patient</th>
<th>Submitted Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>20200000007</td>
<td>Yes</td>
<td>Yes</td>
<td>Demo One</td>
<td>Demo One</td>
<td>8/18/2020</td>
<td>Awaiting Provider Certification</td>
</tr>
<tr>
<td>20200000056</td>
<td>Yes</td>
<td>Yes</td>
<td>Demo User</td>
<td>Demo User</td>
<td>8/18/2020</td>
<td>Awaiting Provider Certification</td>
</tr>
<tr>
<td>20200000055</td>
<td>Yes</td>
<td>No</td>
<td>Demo User</td>
<td>Demo User</td>
<td>8/10/2020</td>
<td>Awaiting Provider Certification</td>
</tr>
</tbody>
</table>
Supporting Documents

When reviewing the case for expedited consideration and/or investigational-experimental certification, all of the information provided by the applicant is available on the Healthcare Provider Review page, which is accessed by clicking on the case Tracking #. These are available in the Supporting Documents section, and the Provider may also attach their own documentation to be considered by the IRO during their final review.

Providing Required Certifications for Expedited/Investigational Requests

Once the treating healthcare provider has reviewed the information and documentation submitted by the applicant, they will enter their certification(s) in the Certification section, which will appear red. Each certification – Expedited and Investigational/Experimental – has its own steps to follow, which are defined on the following page.
Expeditied Requests

When an applicant submits a case, they have the option to choose whether or not they want the review to be expedited. The status of the expedited request is reflected in the Expedited Review/Experimental-Investigation Denial section on the case information page.

In order for the applicant to obtain the documents needed for expedited and experimental-investigational requests, they can either choose to have an E-mail sent to their provider to complete the section in the portal, or they can upload the signed form. Regardless of which option is chosen, the forms will be available for viewing under the Supporting Documents section.

If the applicant requests an expedited review but their case does not meet the criteria (post-service appeal, not time sensitive etc...), the insurer can write a note to the NDOI and indicate that the request does not meet the criteria and must either be changed to a standard review, or more information is necessary in order for the request of an expedited review to be considered. If the request is changed to standard, the Expedited Review/Experimental-Investigational Denial section will be updated to reflect this.
Experimental/Investigational Review Certification

If experimental/Investigational Review is requested, the treating healthcare provider will fill out all applicable information, attach any document to support their review and either agree that the case was denied for experimental/investigational reasons, or overturn. Numbers 1-3 are required in order to submit.
Expedited Review Certification

If Expedited Review is requested, the treating healthcare provider will fill out all applicable information, attach any document to support their review and either agree that the case needs expedited review or overturn.

![Physician/Healthcare Provider Expedited Review Certification Form](image-url)
More on Expedited Review

When requesting an external review, a patient/policyholder/representative can request that review be expedited. To do this, their treating healthcare provider needs to attest that the external review request qualifies/does qualify to be expedited.

To send this to the treating healthcare provider, they can either choose to download and print a pdf copy of the Expedited Review Certification Form and bring this to their treating healthcare provider, or choose to have an email alert sent to have the provider attest via the online portal.

If they select Method 1 (Print/Upload), a signed Expedited Review Certification Form MUST BE attached below before the review request can be submitted.

If they select Method 2 (Email), an email notification will be sent to their treating healthcare provider and they will be able to do their certification steps via the online portal.
More on Experimental/Investigational Review

When requesting an external review, a patient/policyholder/representative can indicate that their insurance claim denial reason was experimental/investigational. To do this, their treating healthcare provider needs to attest that the external review request qualifies/does qualify to be expedited.

To send this to the treating healthcare provider, they can either choose to download and print a pdf copy of the Experimental/Investigational Certification Form and bring this to their treating healthcare provider, or choose to have an email alert sent to have the provider attest via the online portal.

If they select Method 1 (Print/Upload), a signed Experimental/Investigational Review Certification Form MUST BE attached below before the review request can be submitted.

If they select Method 2 (Email), an email notification will be sent to their treating healthcare provider and they will be able to do their certification steps via the online portal.

EXPERIMENTAL/INVESTIGATIONAL DENIAL

If your claim was denied due to experimental/investigational reason, your treating health care provider will need to complete an experimental/investigational review form on the patient’s behalf. Please understand that until a completed form from your treating health care provider is attached to this external review request, an experimental/investigational external review cannot be assigned to an independent review organization. There are two options for obtaining treating health care provider certification:

Method 1 (Print/Upload) You can save this application, download/print the form and work with your treating health care provider to fill out the form. Once completed by your treating health care provider, return to this application to upload the treating health care provider signed copy of the form.

Method 2 (Email) You can select email form to treating health care provider. When you select this option, an email will be sent to the treating health care provider listed below with instructions for completing expedited review certification electronically. We suggest that you follow up with your treating health care provider to let them know that a request was sent to them.

Do you need to obtain experimental/investigational denial certification? Yes

Which method will you obtain certification from your health care provider? Method 1 - Print/Upload

Download Experimental/Investigational Review Certification Form Template

Please attach Experimental/Investigational Denial Form

Attach

Accepted file types: PDF, JPG, GIF, and TIFF.

Document Type

No attached documents were found.